This report contains data through the week ending 11/02/2013 (MMWR week 44).



Overview of Influenza Surveillance: Surveillance for the 2013-2014 influenza season officially began on September 29, 2013. The Utah Department of Health publishes a weekly report throughout the active influenza season that synthesizes data from a variety of sources to give the most complete and up-to-date picture of influenza activity in the state of Utah. Data in this report should be considered provisional, and may change as more complete reports are recieved.

Influenza-like Illness (ILI): The U.S. Outpatient Influenza-like Illness Surveillance Network (ILINet) is a national system that conducts surveillance for influenza-like illness (ILI) in outpatient healthcare facilities. ILINet providers report weekly the total number of patients seen for any reason and the number of patients seen with ILI (defined as a fever ≥ 100° F and a cough or sore throat). These data are used to determine the amount of ILI circulating in the community, as well as provide insight into regional differences in ILI activity. Currently, more than 50 facilities throughout Utah participate in ILINet.

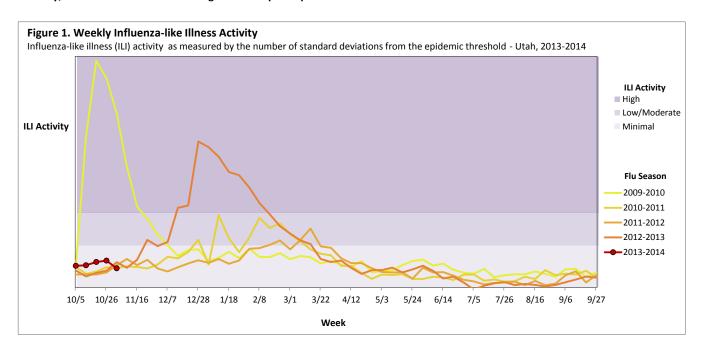


Table 1. Influenza-like Illness (ILI) Activity Levels by Health District - Utah, Current Week

Health District	ILI Activity
Bear River	Minimal
Central	No Data
Davis	Minimal
Salt Lake	Minimal
Southeastern	No Data
Southwest	No Data
Summit	Minimal
Tooele	Minimal
TriCounty	No Data
Utah	Minimal
Wasatch	No Data
Weber-Morgan	No Data
State	Minimal

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Influenza Hospitalizations: Influenza hospitalizations are a reportable condition in Utah. A person meets the case definition for an influenza hospitalization if they are hospitalized for any length of time and have an influenza positive serology, DFA, PCR, or culture test (confirmed case) or a positive rapid influenza diagnostic test (probable case). Public health in Utah gathers a variety of data on influenza hospitalizations including clinical features, course of illness, risk and protective factors, and influenza type and subtype. Data from influenza hospitalizations allows public health in Utah to better understand subgroups of the Utah population that are most severely affected by influenza and help to guide prevention messages and interventions.

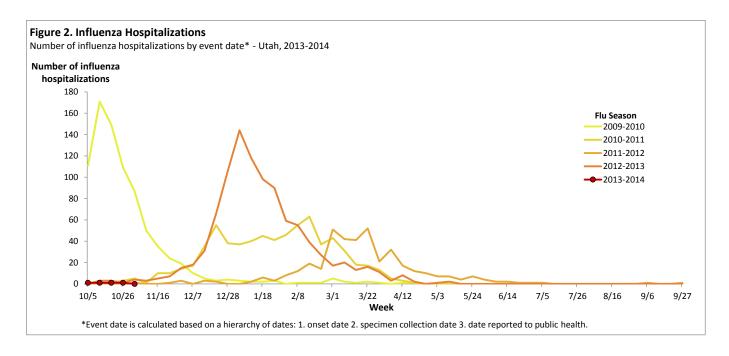


Table 2. Influenza Hospitalizations by Health District - Utah

Health District	Current Week	Season To Date
Bear River	0	0
Central	0	0
Davis	0	0
Salt Lake	0	3
Southeastern	0	0
Southwest	0	0
Summit	0	0
Tooele	0	0
TriCounty	0	0
Utah	0	1
Wasatch	0	0
Weber-Morgan	0	0
State	0	4

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Student Absenteeism: School-age children are at high risk for respiratory virus infections, including influenza. Aggregate, all-cause absenteeism data is collected weekly from over 350 schools throughout Utah. These data are analyzed to identify elevated absenteeism rates that could indicate the circulation of influenza in school-age children.

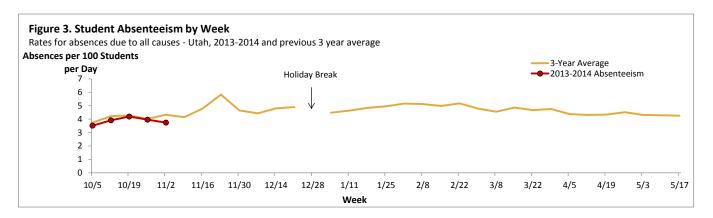
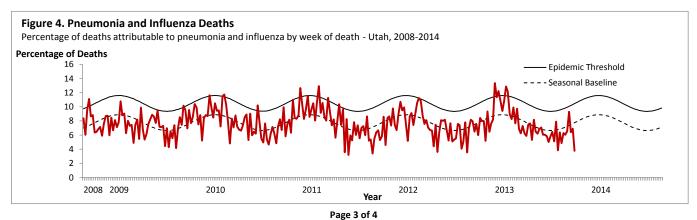


Table 3. Weekly Student Absenteeism - Utah, Current Week

Health District	Absences per 100		
nearth District	students/day		
Bear River	3.2		
Central	5.0		
Davis	2.4		
Salt Lake	3.6		
Southeast	5.2		
Southwest	5.1		
Summit	5.4		
Tooele	6.0		
TriCounty	6.2		
Utah	1.6		
Wasatch	3.5		
Weber-Morgan	4.9		
State	3.8		

Pneumonia and Influenza Deaths: Each week the total number of death certificates received and the number of those for which pneumonia or influenza was listed as an underlying or contributing cause of death is collected. The percentage of deaths due to pneumonia and influenza are compared with a seasonal baseline and epidemic threshold value calculated for each week. These data are used to monitor the severity of influenza illness in the community.



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Laboratory Surveillance: The Utah Public Health Laboratory recieves specimens from all over the state for comprehensive influenza testing. All specimens are tested to determine influenza type and subtype. A portion of specimens are also sent to the Centers for Disease Control and Prevention for additional testing, including gene sequencing, antiviral resistance testing and antigenic characterization.

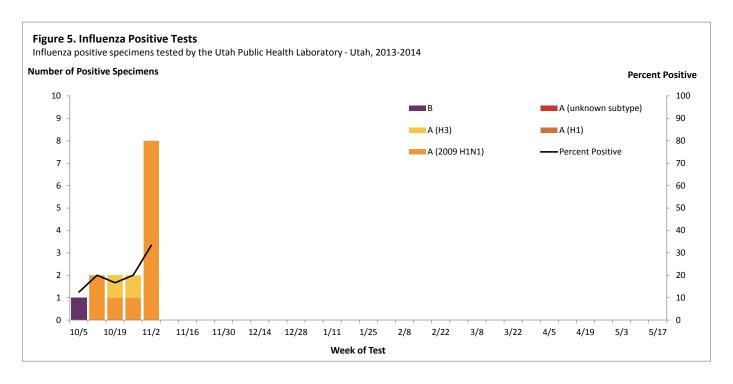


Table 4. Utah Public Health Laboratory Influenza Testing Data

	Current Week		Season	To Date			
	Total	Percent	Total	Percent			
Specimens tested	24		64				
Positive specimens	8	33.3	15	23.4			
Positive Specimens by Type/Subtype							
Influenza A	8	100.0	14	93.3			
A (2009 H1N1)	8	100.0	12	85.7			
A (H1)	0	0.0	0	0.0			
A (H3)	0	0.0	2	14.3			
A (unable to subtype)	0	0.0	0	0.0			
Influenza B	0	0.0	1	6.7			